Resume for County Board Appointment
All questions must be filled in completely or the Resume will be returned.

BOARD OR AGENCY				
Applicant's Name (Please Print)				
			(C)	
e-mail				
Are you a registered voter? Y	'es No	Party affiliation (if require	ed)?	
Are you bondable (if required	l)? Yes No)		
What is your occupation and	by whom employe	ed?		
Do you currently hold any ele	ected or appointed	l position on any board or co	ouncil of any governmental entity	and, if so,
Are you aware of any potenti agency?	al conflict of inter	est, financial or otherwise, c	created by your appointment to th	is board or
Do any family relationships extended the Yes No Between yourself and any off Between yourself and any means are well as a first property of the Yes No	xist between your ficer or employee ember or employe	self and any member or em of Jackson County? Yes ee of the board, agency or u	ployee of the Jackson County Boa No nit of government for which you a	ard? are applying?
		-		
How did you learn of this app	pointment?			

Why do	you want to serv	re on this board or agency?
If this is	a re-appointmen	t for you, how long have you served in this position?
	ces <u>other than</u> me for which you are	embers of the Jackson County Board or the members of the administration of the board or applying:
1.	Name	Phone
	Address	
2.	Name	Phone
	Address	
Certifica	ation:	
		ve information to be true and correct and understand that if any of the information is determined at may be the basis for rejection of this Resume.
<u> </u>		
Signature		Date

Return this Resume **1 (one) month** before the appointment is due to: Chairman, Jackson County Board Office 1001 Walnut Street, Murphysboro Illinois 62966 or Fax to 618/687-7271 Any questions, please call 618/687-7240